

**COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN NURSING
239 Causeway Street, Room 417A
Boston, MA 02114**

**Minutes of the Regularly Scheduled Board Meeting
Wednesday, May 13, 2015**

Board Members Present

S. Kelly, CNP, Chair
K. Gehly, CNP, Vice Chair (out at 1:55 pm)
A. Alley, RN
M. Beal, CNM
P. Gales, RN
J. Killion, LPN
A. Peckham, RN
C. Simonian, PharmD, RPh
S. Taylor, RN
C. Tebaldi, CNP
C. Urena, LPN

Board Members Not Present

B. Levin, RN
E. Richard Rothmund, Public Member

Staff Present

R. Harb, RN, Executive Director
K. Ashe, RN, Nursing Education Coordinator
O. Atueyi, JD, Board Counsel
V. Berg, Chief Board Counsel
H. Cambra, RN, JD, Complaint Resolution Coordinator
D. M. DeVaux, RN, SARP Coordinator
A. Fein, RN, JD, Complaint Resolution Coordinator
K. Fishman, Probation Monitor
K. Keenan, Licensing Coordinator
V. Iyawe, RN, SARP Coordinator
C. Silveira, RN, Assistant Director
L. Talarico, CNP, Nursing Practice Coordinator
T. Westgate, Program Coordinator

Staff Not Present

Guests

See attached list.

TOPIC:

Call to Order & Determination of Quorum

DISCUSSION:

A quorum of the Board was present.

ACTION:

At 9:00 a.m., S. Kelly, Chairperson, called the May 13, 2015 Regularly Scheduled Board Meeting to order.

TOPIC:

Approval of Agenda

DISCUSSION:

None

ACTION:

Motion by J. Killion, seconded by P. Gales, and unanimously passed to approve the agenda as presented.

TOPIC:

Approval of Board Minutes for the March 11, 2015 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None

ACTION:

Motion by C. Simonian, seconded by C. Urena, and unanimously passed to accept the Minutes of the March 11, 2015, Regularly Scheduled Board Meeting.

TOPIC:

Reports

A. Executive Director's Report

B. Staff Report

1. Deputy Executive Director
2. Policy and Research
3. Practice
4. Education
5. Complaint Resolution
6. SARP
7. Probation Monitor

DISCUSSION:

A. Executive Director's Report: Board members reviewed Ms. Harb's previously distributed memo. Ms. Harb informed the Board that on May 4th, 2015, Governor Baker signed the early retirement incentive bill into law and announced that she is applying for early retirement as per this new law. Ms. Harb told the board that she was encountering some unexpected obstacles during the approval process but when her application is approved she will need to retire by June 30th, 2015. Ms. Harb expressed her gratitude to the Board for the privilege and honor to serve as their Board's Education Coordinator, Deputy Executive Director and Executive Director for the last 18 years. Ms. Harb wished the Board the best in their future endeavors in protecting the public through excellence in nursing regulations governing nursing practice and education. Board Chair and staff wished Ms. Harb well and thanked her for her many contributions to the mission of the MA BORN.

Ms. Kelly then announced that Ms. Harb is the 2015 recipient of the R. Louise McManus Award awarded by the National Council of State Boards of Nursing (NCSBN). Ms. Kelly noted that Ms. Harb is recognized at the state, national and global levels as a dedicated professional who is committed to patient safety through innovation, collaboration and public accountability, and that she

has made exemplary contributions to excellence in nursing regulation; demonstrated visionary leadership in public policy development; and advanced the mission and vision of the National Council of State Boards of Nursing (NCSBN). The McManus award recognizes an outstanding nurse regulator's substantial contributions to nursing regulation and public policy development.

B. Staff Reports:

1. None.
2. Members reviewed Ms. Silveira's previously distributed memo.
3. Members reviewed Ms. Talarico's previously distributed memos. Ms. Talarico noted that, in her previously distributed memo, Board staff received communication from NCSBN on March 20, 2015 indicating that the Oncology Certification Corporation (OCC) had been notified by the Boston chapter that "many" RNs that hold oncology certification would "lose the ability to practice" "now that MA has started regulating CNS". Ms. Talarico discussed that, in essence, nothing has changed for these RNs, except their job title. RNs with specialty certification can continue to practice in the same manner in which they practiced prior to promulgation of revised APRN regulations. The practice of such RNs does not require Board authorization and regulation as an APRN.

In addition, on April 15, 2015, Board staff received two emails from RNs that hold certification in holistic nursing requesting the Board "Recognize the practice of the Advanced Practice Holistic Nurse, certified and credentialed by the American Holistic Nurses Credentialing Corporation (APHN-BC®) as an *Advanced Practice Registered Nurse (APHN-BC®-APRN) role*". NCSBN has received similar communication from the American Holistic Nurses Credentialing Corporation (AHNCC). Board staff has requested an opportunity to review the minutes of the upcoming LACE meeting.

4. Members reviewed K. Ashe's previously distributed memo. Members were provided an update on the NCSBN Education Consultant Call with discussion and Q and A with Mary Stoll, new CEO of ACEN. Ms. Ashe provided information and links to the finalized MA Nursing Education Transfer Compact and NLN vision statement on Faculty Role and Preparing Students for the Technological World of Health Care.
5. CRCs reviewed their previously distributed activity report with the member noting the attached power point slides and reference materials that were received from the excellent webinar on "Collaborative Just Culture," that had been arranged by DHPL for Board member development and presented on March 30, 2015. The webinar focused on "Just Culture" concepts and principles that can be incorporated by regulatory boards in the context of their enforcement processes and activities, as the Nursing Board had been done for many years.
6. Members reviewed previously distributed SARP Activity Report.
7. None.

ACTION:

- A. Motion by A.M. Peckham, seconded by P. Gales, and unanimously passed to accept the report.
- B. Motion by A.M. Peckham, seconded by P. Gales, and unanimously passed to accept the reports

TOPIC:

Consensus Agenda

- A. NCSBN Update
- B. Coalition for the Prevention of Medical Errors Update
- C. 2015 Q1 NCLEX Reports

DISCUSSION:

- A. Members reviewed Ms. Talarico's previously distributed NCSBN Updates. Ms. Talarico noted that the memo contains a link for Board members to access NCSBN's 2014 Annual Report that highlights many of its activities and accomplishments during the past year. The report also provides financial information and NCLEX examination pass rate statistics.
- B. Members were provided copies of the MA Coalition for the Prevention of Medical Errors February, 2015 and March, 2015 minutes as well as March, 2015 and April, 2015 reports. Ms. Talarico mentioned that since the Coalition has scheduled its meetings on Mondays (Ms. Talarico does not work on Mondays), it has been difficult for her to attend all the meetings. Ms. Talarico requested that a Board member may consider volunteering to attend the monthly meetings. Ms. Talarico will continue to follow the activities of the Coalition and report to the Board.
- C. Members reviewed Ms. Ashe's previously distributed Q1 NCLEX-RN and PN report. Noting that the NCLEX-RN® passing standard increased substantially in 2013, Ms. Ashe noted that the 2015 year to date NCLEX-RN performance of first-time writers in Baccalaureate programs improved to 87.6 % compared to 86% for the same time period in 2014. The NCLEX-RN® performance for first time writers in the Associate Degree Programs 2015 showed a decline to 84% from 84.6 % reported in 2014. The NCLEX-PN® for first-time writers in Practical Nursing Programs in 2015 also showed a decline to 83% from 86% for the same time period in 2014; the NCLEX-PN passing standard was increased in 2014.

ACTION:

- A. Accepted by consensus
- B. Accepted by consensus
- C. Accepted by consensus

TOPIC:

VALOR Act, Division of Health Professions Licensure Policy 14-01

DISCUSSION:

A copy of the proposed Division Policy 14-01 was distributed at the meeting. Ms. Berg presented a comprehensive overview of the policy, noting it formally authorizes the manner in which each of the nine boards within the Division implement the provisions of Chapter 108: An Act Relative to Veterans' Access, Livelihood, Opportunity and Resources of 2012 ("VALOR Act"). The policy relates specifically to the renewal of licensure and waiver of continuing education requirements for active duty service members, as well as the expediting of applications for spouses of services members transferred into Massachusetts who meet the criteria specified in the VALOR Act. Ms. Berg also noted for board members that the VALOR Act has additional provisions with respect to the acceptance of military education and training towards licensure. In the case of RN or LN licensure, the education and training would need to be incorporated within a board approved nursing education program, since the licensure requirement is that applicants have graduated from such a program and passed an examination. Towards this end, Ms. Berg recommended that in future revisions to 244 CMR 6.00, the Board consider requiring nursing education programs to maintain a policy with respect to any credits offered by the program for military education and training. Ms. Berg pointed out that NCSBN has published a resource of nursing education components that correspond to specific military training and education modules. S. Taylor requested distribution of the NSCBN resource.

ACTION:

Motion by M. Beal, seconded by C. Tebaldi, and unanimously passed to approve the Division of Health Professions Licensure Policy 14-01 as proposed.

TOPIC:

Systematic Evaluation Plan:

- SARP Policy 05-001: Eligibility Criteria for SARP Program
- SARP Policy 05-002: Staff Action on Admissions to SARP Program

DISCUSSION:

D.M. DeVaux presented revisions to policies 05-001, 05-002 explaining that only minor grammatical changes were made.

ACTION:

Motion by M. Beal, seconded by J. Killion, and unanimously passed to approve the revisions to SARP policies 05-001 and 05-002.

TOPIC:

Systematic Evaluation Plan: Education Policy 05-01: Clarification of the Term, Institutional Accreditation at 244 CMR 6.01

DISCUSSION:

Ms. Ashe presented proposed revisions to Education Policy 05-01, noting that while no conceptual changes are recommended, the proposed amendments are: a new policy title and edits to the policy purpose; formatting changes to include the addition of a definition section and numbered paragraphs; and updating the organization title, Joint Commission on Accreditation of Health Care Organizations to read, Joint Commission.

ACTION:

Motion by C. Urena, seconded by M. Beal, and unanimously passed to approve the revisions to Education Policy 05-01 as proposed.

TOPIC:

Practice

- A. Proposed revisions to minimum requirements for medical, mental health, substance abuse and forensic evaluations
- B. Proposed revisions to AR 9204: Infusion Therapy

DISCUSSION:

- A. Ms. Talarico presented evidence based information to Board members requesting inclusion of credentialed, qualified APRNs as approved evaluators when the Board requires a medical, mental health, substance abuse or forensic evaluation to assist in making recommendations for discipline or license reinstatement. C. Simonian requested that the proposed revisions to the attachments be consistent in their reference to "providers", thereby allowing for qualified APRN to be evaluators. C. Tebaldi questioned, when referencing Psychiatric Clinical Nurse Specialist, whether or not the term Psychiatric Mental Health Clinical Nurse Specialist would be more accurate. Ms. Talarico explained that the Board, in 244 CMR 4.00, references the clinical category of Psychiatric Clinical Nurse Specialist as the approved title. She also noted that the title Nurse Practitioner should read Certified Nurse Practitioner. H. Cambra noted to Board members that the same criteria would apply to Good Moral Character review.

B. Ms. Talarico, in referencing her previously distributed memo (Proposed revisions to AR 9204: Infusion Therapy), detailed the findings and recommendations of the Nursing Practice Advisory Panel (NPAP). Based on its review of a variety of data and information (see Attachment 1), the NPAP found that since the time the Board issued AR 9204 in 2012:

- Professional organization position statements reviewed by NPAP in 2012 have undergone review and revision; no substantive changes have been made
- The Infusion Nurses Society Board of Directors found wide variability in infusion education programs and adopted *Recommendations for Improving Safety Practices With Short Peripheral Catheters* in October 2013. The recommended subject matter list is more comprehensive than the Board's current AR educational requirements. Inclusion of INS recommendations would be consistent with the Board's regulation at 244 CMR 9.03(11) requiring a nurse to perform nursing techniques and procedures only after appropriate education and demonstrated clinical competency
- An internet search did not identify new or conflicting information since the NPAP review in 2012
- The AR did not address the role of the nurse in a management role

ACTION:

A. Motion by K. Gehly, seconded by P. Gales, and unanimously passed to include credentialed, qualified APRNs as approved evaluators when the Board requires a medical, mental health, substance abuse or forensic evaluation to assist in making recommendations for discipline, license reinstatement and Good Moral Character review. Revisions to attachments will consistently reference "providers" and titles of Psychiatric Clinical Nurse Specialist and Certified Nurse Practitioner.

B. Motion by M. Beal, seconded by A. Peckham, and unanimously passed to:

1. Find that the INS recommends consistency in education leading to short peripheral catheter (SPC) pre-insertion, insertion and post-insertion to improve patient safety and clinical outcomes
2. Find that there are no other changes in the standards of practice for SPC
3. Revise AR 9204: *Infusion Therapy* (see attachment 2) by including:
 - The Board approved standardized reference requiring licensee compliance with all nursing licensure and practice laws and regulations
 - Updated educational criteria as listed in Infusion Nurses Society October 2013 position paper *Recommendations for Improving Safety Practices with Short Peripheral Catheters* that is comprehensive and includes:
 - Pre-insertion assessment and placement
 - Ongoing assessment and monitoring of indwelling catheter
 - Infection prevention and Standard Precautions
 - Identification, prevention, and management of complications
 - Patient /caregiver education
 - Removal of catheter
 - Documentation
 - Surveillance/quality improvement/outcomes
 - Use of adjunct aids such as ultrasound for vein identification and selection when applicable

- A statement defining the role of the nurse in a management role as one that must ensure the availability of sufficient resources to provide for safe implementation, including, but not limited to organizational policies that provide for:
 - Protocols for requiring and providing appropriate infusion therapy education
 - Protocols for assessing and documenting the education received and validation for RN and LPN initial and continued competency for each activity
 - Nursing care responsibilities, including, but not limited to patient assessment, monitoring, medication administration, potential complications, and documentation criteria
 - Emergency protocols including, but not limited to, immediate, on site availability of emergency equipment, medications and personnel
- Updated references

TOPIC:

Education

A. 244 CMR 6.04(1)(c) and (1)(f) Administrative Changes

1. Anna Maria College (CEO)
2. Montachusette Regional Vocational Technical School District (CEO)
3. Berkshire Community College (Program Administrator)
4. MGH Institute of Health Professions (Program Administrator)

B. 244 CMR 6.06(2): Waiver of 244 CMR 6.06(1)(a)

1. Mt. Wachusett Community College Associate Degree Program
2. Mt. Wachusett Community College Practical Nurse Certificate Program
3. MGH Institute of Health Professions Baccalaureate and Direct Entry Masters
4. Springfield Technical Community College Associate Degree Program

C. Education Policy 99-03: Proposed Revision, Paragraph 11

DISCUSSION:

- A. Members reviewed Ms Ashes' previously distributed memo.
- B. Members reviewed Ms. Ashes' previously distributed Compliance and Accreditation-related reports. Dean Eileen Costello (Program Administrator), Mt. Wachusett CC, Associate Degree and the Practical Nurse Certificate programs was present to respond to Board Member questions. S. Taylor, asked Dean Costello about the programs expected levels of achievement (ELA's) for program outcomes, and stated greater emphasis is being placed by ACEN. K. Gehly asked Dean Costello about feasibility of timeframe and submitting reports to the Board. Dr. Costello offered timeframe is agreeable.
- C. Members reviewed Ms. Silveira's previously distributed memo.

ACTION:

- A. Motion by P. Gales, seconded by A. Alley, and unanimously passed to find compliance with 244 CMR 6.04(1)(c) and 6.04(1)(f) in the appointment of
 1. Mary Lou Retelle, Interim President, (*Chief Executive Officer*), Anna Maria College.
 2. Dr. Sheila Harrity, Superintendent-Director, (*Chief Executive Officer*) Montachusette Regional Vocational Technical School District.
 3. Christine Martin, MSN, RN Acting Director, ADN-RN and Practical Nursing programs (*Program Administrator*), Berkshire Community College..
 4. Linda C. Andrist, PhD, RNC, WHNP-BC, Interim Dean of the School of Nursing (*Program Administrator*), MGH Institute of Health Professions.

B. 1 Motion by P.Gales, seconded by J.Killion, and unanimously voted to deny a waiver of 244 CMR 6.06(1)(a) to Mt. Wachusett Community College Associate Degree Program based on actions taken by the Accreditation Commission for Education in Nursing (ACEN) on July 2014 placing the program on Continued approval with Warning. Find that the Program's ACEN Continued Approval with Warning to be grounds for review of the programs approval by the Board [ref: 244 CMR 6.08 (1)(5)].

1. Direct the program to submit a report to the Board by no later than July 31, 2015 addressing the following,
 - Allocation of adequate numbers of full-time faculty, part-time faculty and support staff to support development, implementation and evaluation of policies, curriculum, the systematic plan for program evaluation including measurable outcomes and results are used for the development implementation and evaluation of the Program's policies, curriculum and systematic program evaluation.
 - Demonstrate the outcomes of systematic program evaluation including measureable outcomes are used to develop, maintain and revise the program including,
 - a) evidence that the student learning outcomes are used to guide the delivery of instruction, direct learning activities and evaluate student progress [ref: 244 CMR 6.04 (4)(b)(2)].
 - b) evidence that the evaluation methods reflect established professional and practice competencies and measure the achievement of the student learning outcomes[ref: 244 CMR 6.04 (4)(b)(3)and (3)(b)].
 - c) evidence that the evaluation plan emphasizes the ongoing assessment and evaluation of the student learning outcomes, the program outcomes and role-specific graduate competencies [ref: 244 CMR 6.04(1)(e)].
 - d) evidence the evaluation plan contains measureable expected levels of achievement and a minimum of three (3) years of data for each component within the plan[ref: 244 CMR 6.04(1)(e)].
 - e) evidence that aggregated evaluation finding are sufficient to inform program decision-making and are used for the maintenance and improvement of the student learning outcomes and program outcomes[ref: 244 CMR 6.04(1)(e)].
 - f) evidence that graduate satisfaction has been assessed in a systematic and ongoing manner and the data are sufficient to inform program decision-making[ref: 244 CMR 6.04(1)(e)].
 1. evidence that the job placement is assessed in a systematic and ongoing manner and the data are sufficient to inform program decision-making[ref: 244 CMR 6.04(1)(e)].
2. Submit to the Board the Program's new Self- Study, and outcomes of the Site-Visit, planned for Fall 2016, including the Site Visitors' Report and the Board of Commissioners' final actions notification within 15 days of receipt by the program administrator.
 - a) In the event the ACEN Board of Commissioners affirm continuing accreditation, accept the recommendations of the ACEN Board of Commissions and reevaluate the waiver of 244 CMR 6.06(1)(a).
 - b) In the event the ACEN Board of Commissioners deny continuing accreditation the Program's continuation of Full Approval at 244 CMR 6.05(3)(b) will be reviewed. A site survey of the Program, in accordance with 244 CMR 6.08 (1)(b), will be conducted no later than the conclusion of the Fall 2017 semester, with the outcomes of the survey either Continuation of Full Approval status or Approval with Warning Status[ref 244 CMR 6.08 (2)].

B. 2 Motion by P.Gales, seconded by J. Killion, and unanimously passed to grant a waiver of 244 CMR 6.06(1) (a) to Mt. Wachusett Community College Practical Nurse Certificate Program based on

review of the findings and recommendations of Board-recognized accrediting agency in nursing, and Program's Annual Report to the Board, with recommendations:

1. Due on October 1, 2016, a progress report outlining compliance with the ACEN recommendations, including:
2. The Follow-Up Report as directed by ACEN and due February 15, 2016
 - a) evidence that the student learning outcomes are used to guide the delivery of instruction, direct learning activities and evaluate student progress [ref: 244 CMR 6.04 (4)(b)(2)].
 - b) review and revise course materials to ensure the student learning outcomes are consistently and clearly articulated [ref: 244 CMR 6.04 (4)(b)(2)].
 - c) evidence that the evaluation methods reflect established professional and practice competencies and measure the achievement of the student learning outcomes[ref: 244 CMR 6.04 (4)(b)(3)and (3)(b)].
 - d) evidence that the evaluation plan emphasizes the ongoing assessment and evaluation of the student learning outcomes, the program outcomes and role-specific graduate competencies [ref: 244 CMR 6.04(1)(e)].
 - e) evidence the evaluation plan contains measureable expected levels of achievement and a minimum of three (3) years of data for each component within the plan[ref: 244 CMR 6.04(1)(e)].
 - f) evidence that aggregated evaluation finding are sufficient to inform program decision-making and are used for the maintenance and improvement of the student learning outcomes and program outcomes[ref: 244 CMR 6.04(1)(e)].
 - g) evidence that graduate satisfaction has been assessed in a systematic and ongoing manner and the data are sufficient to inform program decision-making[ref: 244 CMR 6.04(1)(e)].
 - h) that the job placement is assessed in a systematic and ongoing manner and the data are sufficient to inform program decision-making[ref: 244 CMR 6.04(1)(e)].
3. Written evidence of the action taken by the ACEN Board of Commissioners, following review of the Follow-Up Report, with continued accreditation of the nursing program with the next evaluation visit scheduled for spring 2022, or denying continuing accreditation. The findings of the ACEN Board of Commissioners will be reported to the Board within 15 days of receipt by the nursing program administrator.

B. 3 M. Beal recused herself. Motion by P.Gales, seconded by A. Alley and unanimously passed to grant a waiver of 244 CMR 6.06(1)(a) to MGH Institute of Health Professions Baccalaureate and Direct Entry Masters based on review of the findings and recommendations of Board-recognized accrediting agency in nursing, and Program's Annual Report to the Board.

B. 4 Motion by P.Gales, seconded by C.Simonian and unanimously passed to grant waiver a of 244 CMR 6.06(1)(a) to Springfield Technical Community College Associate Degree Program based on review of the findings and recommendations of Board-recognized accrediting agency in nursing, and Program's Annual Report to the Board, with recommendations:

1. Demonstrate full compliance with regulation as evidenced by
 - Ensure the mission/philosophy and purpose statements are congruent with the identified program competences [ref 244 CMR 6.04 (1)(a)].
2. Provide evidence of compliance to the Board no later September 1, 2015.

C. Motion by M. Beal, seconded by S. Taylor, and unanimously passed to approve the correction to Paragraph 11, Education Policy 99-03: Determination of Nursing Education Program Compliance

with Provisions of 244 CMR 6.00 by the Board's Nursing Education Coordinator: On receipt of the Program administrator's report and any additional clarifying information, the Nursing Education Coordinator will refer the allegation or complaint and the Program administrator's report to the Board for review of the Program's approval status.

TOPIC: Probation Compliance in the matter of **M. Kashmanian**, RN232150, NUR-2012-0184. Ms. Fishman reviewed her previously distributed memo, which relates to a request from the licensee to further extend the time allowed for her to complete the "active practice" terms of the Consent Agreement for six (6) months Probation. Specifically, this nurse requested that she be allowed an additional extension beyond the nine (9) month extension that was authorized on December 20, 2013 by staff action authority because she has been unable to obtain an appropriate nursing position. This most recent request would allow an extension beyond the Board's current Discipline Policy 07-01 for delegated staff action authority, which allows for extending the duration of the original probationary period for up to twice the length of the original probation period, as long as the licensee has been and remains in compliance with the Agreement.

Ms. Fishman explained that the Licensee has not been able to find a job since was terminated for documentation inaccuracies from the nursing job she had approximately six (6) weeks into her probation. The Licensee believed she was terminated because her supervisor(s) at her place of employment were unwilling have a nurse on probation as part of the staff. The matter of the job termination was transferred from the Probation Department to the Office of Public Protection for further investigation. A staff investigator requested additional information from the employer. However, the results of the investigation were not sufficient to substantiate that the Licensee was terminated for inaccurate documentation and therefore no violation of probation was issued.

K. Fishman at first recommended allowing a final extension of nine (9) months to allow the Licensee to comply with the active practice requirements of the Agreement. This extension would allow a period of three (3) months for the Licensee to find an appropriate nursing job followed by a period of six (6) months to fulfill the active practice requirements of the Agreement. The recommendation included that the Licensee must also provide monthly job search status letters to include a detailed description of her nursing employment search activities and submit documentation verifying that she is employed in an appropriate nursing position no later than three (3) months from the date of the Board's written notice of the final extension. Finally, the recommendation included that in the event that the Licensee fails to comply with the specific conditions as noted above, authorizing the issuance to the Licensee of a Notice of Further Discipline with the intention to suspend the nurses' RN license.

DISCUSSION:

K. Fishman stated that notwithstanding her recommendation, she is hesitant to recommend further discipline if the Licensee does not comply with the active practice requirements of the Agreement. Ms. Fishman explained that while it has been the normal practice to allow Licensees a "final" extension and then move to suspend a nurse's license if s/he does not comply, she does not think it is the best practice or necessarily fair to further discipline a nurse who has shown that she has been actively looking for a nursing job but cannot find an appropriate position while on probation. Ms. Fishman asked the Board member if they had any ideas or further thoughts on what to do in this type of situation. M. Beal mentioned that the language in the Agreement does not allow much leeway in considering those who had lesser offenses and were placed on probation. S. Kelly recommended not suspending the Licensee if she is unable to complete probation due to not being able to find a job. M. Beal said she would prefer giving the Licensee an additional six (6) months to find work. Board Counsel V. Berg explained the Board does not need to be limited by the Agreement and does not need to authorize a suspension. S. Taylor then

suggested removing the word final from K. Fishman's recommendation. M. Beal stated she would prefer to see the Licensee have six (6) months to find a job and an additional six (6) months to complete the probation requirements; and if the Licensee still cannot find a job at the end of the initial six (6) months, the Probation Monitor should come before the Board again.

A. Fein suggested asking the Licensee to submit more frequent and detailed information about her job search efforts. R. Harb suggested the Board may wish to consider the problem of nurses on probation getting jobs when it considers new complaints in the future. S. Taylor suggested developing a template with information about the Licensee's job search efforts. S. Kelly thought it would be a good idea to have the Licensee document phone calls and where she sends her resumes to, so that the Licensee would be doing more follow up on her work search efforts.

ACTION:

Motion by M. Beal, seconded by A. Peckham and unanimously passed to allow the Licensee an extension of six (6) months to find a nursing job, and once the job is in place, to allow an additional extension of six (6) months to complete the active practice requirement of the Agreement. During the initial period of extension, the licensee must engage on a weekly basis in a search for nursing employment and submit on a monthly basis a detailed description of her employment search activities. If the Licensee does not find an appropriate nursing job within the six (6) month period, this matter shall come back before the Board to determine next steps.

TOPIC: Probation Compliance in the matter of **Cheryl A. Oliphant**, RN170290, NUR-2011-0205. K. Fishman summarized her previously distributed memo. The Licensee entered into a Probation Agreement with the Board due to a violation with the California Board of Nursing. The Licensee let her MA license expire in 1/10/12 but contacted K. Fishman in response to a violation notice sent to her so that she could renew her Massachusetts license. The licensee's RN license was renewed 1/14/15. The Licensee has been working as a nurse in Santa Monica, CA since the effective date of the Probation Agreement. The Licensee was not required to submit documentation of successful completion of her California Probation, but K. Fishman was able to obtain documentation from the State of California's, Department of Consumer Affairs website verifying the successful completion of the Licensee's CA probation, effective on 8/11/14. K. Fishman recommended that the Board approve the Licensee's request to terminate the Probationary status on her license based on the Licensee's satisfactory compliance with the requirements of Agreement.

DISCUSSION: A. Fein identified that she had checked the Licensee's Nursys records and found that the during 2014, Licensee's New York nursing license had been suspended for one month, which was stayed for a period with a two year probation upon the Licensee's return to New York to practice, and that her Nevada nursing license renewal had been denied in 2012 based on her falsification of her renewal application on which she failed to disclose the California disciplinary action that was pending against her. A. Fein further reported that these license disciplinary actions were based on the discipline of her California nursing license.

ACTION: Motion by K. Gehly, seconded by M. Beal and unanimously passed to terminate the Licensee's probation based on her satisfactory compliance with the requirements of probation in California and Massachusetts.

TOPIC:

NCSBN 2015 Special Delegate Assembly – Appointment of Delegates

DISCUSSION:

R. Harb asked the Board to ratify the appointment of S. Kelly and R. Harb as MA BORN delegates to the NCSBN 2015 Special Delegate Assembly meeting held May 4, 2015 in Chicago, IL. Board members reviewed the previously distributed Summary of Key provisions and language revisions to the nurse licensure compact and the revisions to the APRN Interstate Compact that were approved at the Delegate Assembly on 5/4/15.

ACTION:

Motion by P. Gales, seconded by M. Beal, and unanimously passed to ratify the appointment of S. Kelly and R. Harb as MA BORN delegates to the NCSBN 2015 Special Delegate Assembly meeting held May 4, 2015 in Chicago, IL.

TOPIC:

FY 16 Board Meeting Schedule

DISCUSSION:

Board members reviewed the previously distributed FY 16 Board Meeting Schedule, noting that the November meeting will be the 3rd week on November 18, 2015 and no meeting is scheduled for August 2015

ACTION:

Motion by J. Killion, seconded by A. Alley, and unanimously passed to approve the FY 16 Board Meeting Schedule as presented.

TOPIC:

FY 16 Call for Board officer Nominations

DISCUSSION:

Board members reviewed the previously distributed memo asking for nominations to be returned by May 22, 2015

ACTION:

So noted

TOPIC:

G.L. c.30A, §21 Executive Session

DISCUSSION:

None

ACTION:

Motion by S. Taylor, seconded by J. Killion, and unanimously passed by roll call vote to go into Executive Session at 10:35 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

G.L. c. 30A, § 21 Executive Session 10:35 a.m. to 12:00 p.m.

Recess 10:35 a.m. to 10:50 a.m.

TOPIC:

Adjudicatory Session

DISCUSSION:

None

ACTION:

Motion by K. Gehly, seconded by P. Gales, and unanimously passed by roll call vote to go into Adjudicatory Session at 12:00 p.m. to discuss decisions in pending adjudicatory matters.

Adjudicatory Session 12:00 p.m. to 12:15 p.m.

Lunch 12:15 p.m. to 12:45 p.m.

TOPIC:

G.L. c. 112, s. 65C Session

DISCUSSION:

None

ACTION:

Motion by C. Simonian, seconded by A. Alley, and unanimously passed by roll call vote to go into G.L. c. 112, s. 65C Session at 12:45 p.m. to discuss negotiated settlements of complaints.

G.L. c. 112, s. 65C Session 12:45 p.m. to 3:15 p.m.

TOPIC:

Adjournment

DISCUSSION:

None

ACTION:

Motion by P. Gales, seconded by C. Simonian, and unanimously passed to adjourn the meeting at 3:15 p.m.

Respectfully submitted by:



Rula Harb, MS, RN, Executive Director
Board of Registration in Nursing

Agenda with exhibits list attached

COMMONWEALTH OF MASSACHUSETTS

**NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE
BOARD OF REGISTRATION IN NURSING**

May 13, 2015

239 Causeway Street ~ Room 417 A&B
Boston, Massachusetts 02114

PRELIMINARY AGENDA AS OF 5/7/2015 12:49 PM

Estimated Time	#	1. Item	Exhibits	Presented by
9:00 a.m.	I.	2. CALL TO ORDER & DETERMINATION OF QUORUM	None	
	II.	APPROVAL OF AGENDA	Agenda	
	III.	APPROVAL OF BOARD MINUTES A. Draft Minutes for the March 11, 2015 Meeting of the Board of Registration in Nursing, Regular Session	Minutes	
	IV.	REPORTS A. Executive Director's Report B. Staff Report 1. Deputy Executive Director 2. Policy and Research 3. Practice 4. Education 5. Complaint Resolution 6. SARP 7. Probation Monitor	Report Report Report Report Report Report Quarterly Report	RH -- CS LT KA AF/HC VI/DM KF
	V.	CONSENSUS AGENDA A. NCSBN Update B. Coalition for the Prevention of Medical Errors Update C. 2015 NCLEX Reports Q1	Memo February, 2015 and March, 2015 minutes; March, 2015 and April Reports Reports	LT LT KA
	VI.	POLICY A. Valor Act, Division of Health Professions Licensure Policy B. Systematic Evaluation Plan: 1. SARP Policy 05-001: Eligibility Criteria for SARP Program 2. SARP 05-002: Staff Action on Admissions to SARP Program 3. Education Policy 05-01: Clarification of the Term, Institutional Accreditation at 244 CMR 6.01	Oral Report Memo and Proposed Policies	VB VI/DMD KA

Estimated Time	#	3. Item	Exhibits	Presented by
	VII.	PRACTICE A. Proposed revisions to minimum requirements for medical, mental health, substance abuse and forensic evaluations B. Proposed revisions to AR 9204: Infusion Therapy	Memo Memo	LT LT
	VIII.	EDUCATION C. 244 CMR 6.04(1)(c)&(1)(f) Administrative Changes 1. Anna Maria College (CEO) 2. Montachusette Voc Tech School District (CEO) 2. Berkshire Community College, ADN-RN and Practical Nursing (Program Administrator) 3. MGH Institute of Health Professions (Program Administrator) B. 244CMR 6.06(2) Site Survey Waiver Request 1. Mt. Wachusett CC ADN-RN 2. Mt. Wachusett CC PN Certificate 3. MGH IHP Baccalaureate and Direct Entry Masters 4. Springfield Technical CC ADN-RN C. Education Policy 99-03: Proposed Revision, Paragraph 11	Reports Compliance Reports Memo	KA KA CS
	IX.	PROBATION A. M. Kashmanian, RN232150, NUR-2012-0184 B. C. Oliphant, RN170290, NUR-2011-0205	Memo Compliance Summary	KF KF
	X.	FLEX SESSION A. NCSBN 2015 Special Delegate Assembly – Appointment of Delegates B. FY 16 Board Meeting Schedule C. FY 16 Call for Board officer Nominations	Oral Report Memo Memo	RH
10:30 a.m.	XI.	EXECUTIVE SESSION The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. 1. Specifically, the Board will discuss and evaluate the Good Moral Character as required for registration for pending applicants. 2. Specifically, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their petitions for license and probation status change. 3. Approval of prior executive session minutes in accordance with M.G.L. ch.30A, § 22(f) for sessions held during the March 11, 2015 meeting.	CLOSED SESSION	

Estimated Time	#	4. Item		
11:45 a.m.	XII.	ADJUDICATORY SESSION (M.G.L. c. 30A, § 18)	CLOSED SESSION	
12:15 p.m.		LUNCH		
	XIII.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION	
4:00 p.m.	XIV.	ADJOURNMENT		